

# PART B - ISSUE FEE (S) TRANSMITTAL

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**Box ISSUE FEE**  
**Assistant Commissioner for Patents**  
**Washington, D.C. 20231**

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

REED SMITH LLP  
 SUITE 1400  
 3110 FAIRVIEW PARK DRIVE  
 FALLS CHURCH, VA 22042



Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate

## Certificate of Mailing

I hereby certify that this Issue Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelop addressed to the Box Issue Fee address on the date indicated below..

(Depositor's name)  
 (Signature)  
 (Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/534,049	05/06/2005	Tomonori Sekiguchi	TSUT.0087	8465

## TITLE OF INVENTION: SENSE AMPLIFIER FOR SEMICONDUCTOR MEMORY DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/06/2007

EXAMINER	ART UNIT	CLASS - SUBCLASS
PHUNG, ANH K	2824	365-207000

- Change of correspondence address or indication of ☐ Fee Address\* (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required.  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**HITACHI, LTD.**  
**ELPIDA MEMORY, INC.**  
**HITACHI ULSI SYSTEMS CO., LTD.**

**Tokyo, Japan**  
**Tokyo, Japan**  
**Tokyo, Japan**

Please check the appropriate assignee category indicated (will not be printed on the patent) ☐ individual ☒ Corporation or private group entity ☐ government

4a. The following fees are enclosed:

- ☒ Issue fee  
☒ Publication Fee  
☒ Advance Order - # of Copies: 3

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1480 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.

(Authorized Signature)

(Date) February 15, 2007

Stanley P. Fisher Reg. No.: 24,344  
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered patent attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office

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01 FC:1501	1400.00 OP
02 FC:1504	300.00 OP
03 FC:8001	9.00 OP

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PTOL-85 (Rev.07-01) Approved for use through 01/31/2004. OMB 0651-0033

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